# **Cook County Hospital & Health System Quality and Patient Safety Committee** December 14, 2018 Richard Keen, MD FACS, Chair **Department of Surgery COOK COUNTY**

## Surgery within Cook County Health is performed by surgeons within the Departments of

Surgery

Trauma

Obstetrics & Gynecology.

#### Supported by the

Departments of Anesthesiology, and Nursing Services.

#### The Department of Surgery

16 Divisions

~100 Attending Surgeons

### SurgicaEducatiomand Training

~80 Surgical Residents at any given time 0 different Residents per year

Surgical Discipline (Sponsoring Institution)	Number of Residents
General Surgery (Stroger/Provident/Rush/University of Illinois)	22
Orthopedic Surgery (Rush, Northwestern, & Midwestern)	9
Otolaryngology (University of Illinois/Northwestern)	6
Ophthalmology (Stroger/Provident)	14
Oral and Maxillofacial Surgery (Stroger/Provident)	8
Neurosurgery (Stroger/Rush)	2
Colon-Rectal (Stroger/University of Illinois/Lutheran General)	3
Urology (Stroger/Northwestern)	11
Cardiothoracic (Stroger/Rush)	2
Anesthesiology (Stroger/Northwestern)	4
Surgical Endocrinology (Stroger/University of Chicago/ NorthShore)	1
Surgical Critical Care (Stroger)	3



#### Medical Student filiations

~40 Medical Students at any given time, ~450 Medical Students per year

Medical School	Number of Students
University of Illinois	55
Rosalind Franklin University	106
Midwestern University	102
Rush University	71
AT-Still University	25
Dominican University PA	12
International (SICU, Brazil ONLY)	10
Non- Affiliated University – Electives	40
Affiliated University – Electives	30



### Surgery Strategio oals for 20 18: To advance and improve the delivery of surgical services for the residents of Cook County

1. CCH FY 2018 Budget Projections:

Increase Stroger operative volume by 5%

Increase Provident operative volume by 10%

- 2. Department of Surgery Quality, Patient Safety and Performance Improvement Activities
- 3. Outcomes



Increase Stroger operative volume by 5% and increase Provident Operative volume by 10%

Stroger Volume	FY17	FY18	Change FY17 – FY18
Department of Surgery	9,756	10,276	+5%
Department of Trauma	574	615	+7%
Department of Obstetrics/Gynecology	907	946	+4%
Stroger Total	11,237	11,837	+5%
Provident Total	2,262	2,759	+22%
System Total	13,499	14,455	+7%



Department of Surgery Patient Safety Activities

#### **Cook County Health** Quality Assurance Activities:

- Operating Room Committee
- National Surgical Quality Improvement Project (NSQIP)
- Illinois Surgical Quality Improvement Collaborative (ISQIC)



Department of Surgery Patient Safety Activities

#### **Hospital** Quality Assurance Activities:

- The Hospital-Wide Quality Assurance and Improvement Committee
- Hospital Oversight Committee
- Long Stay Committee



Department of Surgery Patient Safety Activities

#### **Department and Division** Quality Assurance Activities:

- Peer Review
  - Privileging
  - Ongoing Professional Practice Evaluation
  - Focused Professional Practice Evaluation
- Selected Patient Care Audits
- Morbidity & Mortality Conference (weekly)
- Surgical Oversight Committee (monthly)



Outcomes - Elective Surgery Wait Times \*Urgent cases done every day

Surgery Specialty	Elective Case Wait Time (Weeks)
Breast	1
CT Surgery	2
Colorectal	3
General Surgery	9
Neurosurgery	2
Bariatric Surgery	2
Ophthalmology	4
Oral Maxillofacial	4
Orthopedics	17



## Strategic Goals for 2018 Outcomes Elective Surgery Waltimes

\*Urgent cases done every day

Surgery Specialty	Elective Case Wait Time (Weeks)
Podiatry	4
Otolaryngology	5
Pediatric Surgery	1
Plastic Reconstructive Surgery	12
Surgical Oncology	2
Urology - Open	17
- Cystoscopy	12
- Pediatric	5
Vascular	4



## Strategic Goals f2018 Performance Improvement

EnhancedRecovery After Surgery (ERAS)

- Enhanced recovery for colectomy patients:
  - working with general and colon rectal surgeons, anesthesia, pain service and nursing leadership to initiate a comprehensive multi-disciplinary protocol
- Result:
  - inpatient length of stay decreased by 2 days with no increase in morbidity



Performance Improvement

#### Surgical Site Infections (SSI)

- Received first semiannual report highlighting opportunity for improvement in January 2016 from NSQIP
- Assembled team and developed treatment bundle
- Staged implementation in December 2016

Study Period	Report Date	SSI Rate (weighted)
7/1/2014 – 6/30/2015	January 2016	4.09%
7/1/2015 – 6/30/2016	January 2017	3.55%
7/1/2016 – 6/30/2017	January 2018	2.68%



## SSI Reduction: Processe asures audit 4/19/2017–12/18/2017

Intervention Bundle	<b>Adherence</b>
<ul> <li>Chlorhexidine Bath Written Instructions</li> </ul>	73%
<ul> <li>Chlorhexidine Bath Before Surgery</li> </ul>	80%
<ul> <li>Laparotomy Discharge Instructions</li> </ul>	78%
<ul> <li>Timely antibiotic Prophylaxis</li> </ul>	93%
<ul> <li>Timely redose of antibiotics</li> </ul>	72%
<ul> <li>Use of dedicated abdominal closure sets</li> </ul>	57%
<ul> <li>Redraping sterile filed prior to wound closure</li> </ul>	43%
<ul> <li>Gown/Glove/Drape change during wound</li> </ul>	
closure for gastrointestinal surgery	45%
<ul> <li>Appropriate temperature after surgery</li> </ul>	98%



Outcomes: Patient Experience

- Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
- Random sample of elective surgery patients 2017-2018

SPECIALTY COMPARISON	Your Top Box Score Nov 17 - Oct 18
Domains and Questions	Surgical
Rate hospital 0-10	74.8%
Recommend the hospital	77.2%



Outcomes: Patient Experience

SPECIALTY COMPARISON	Your Top Box Score Nov 17 - Oct 18
Domains and Questions	Surgical
Comm w/ Doctors	84.6%
Doctors treat with courtesy/respect	88.7%
Doctors listen carefully to you	82.6%
Doctors expl in way you understand	82.5%



Outcomes: Patient Experience

SPECIALTY COMPARISON	Your Top Box Score Nov 17 - Oct 18
Domains and Questions	Surgical
Discharge Information	87.3%
Staff talk about help when you left	79.2%
Info re symptoms/prob to look for	95.3%
Care Transitions	51.8%



Outcomes: Patient Experience

Stroger Hospital of Cook County

10/01/2018 - 10/31/2018

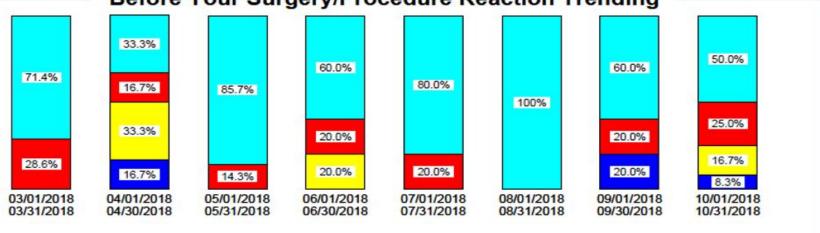
### Ambulatory Comments Report Section / Service Type

#### Before Your Surgery/Procedure

#### Before Your Surgery/Procedure Summary

Comments Processed:	12	Total Surveys Processed:	12
Positive Reactions:	6	Mixed Reactions:	2
Negative Reactions:	3	Neutral Reactions:	1
Pos/Neg Ratio:	2.00	Open-ended Comments:	0

#### Before Your Surgery/Procedure Reaction Trending





Positive Negative

Mixed

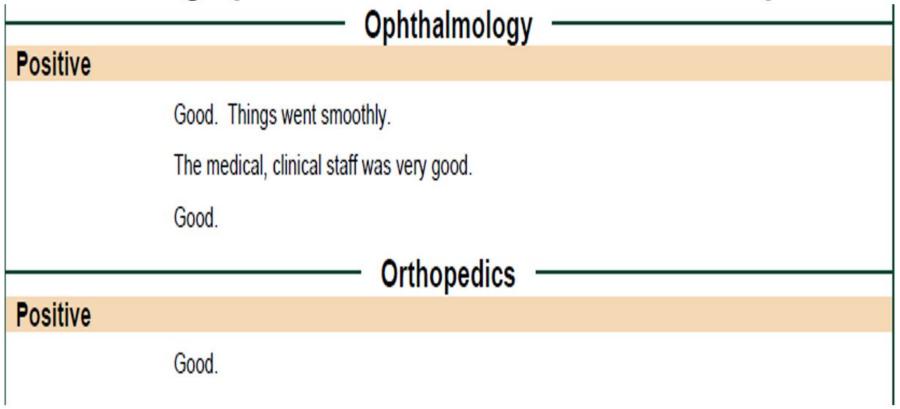
Neutral

Open

18

Outcomes: Patient Experience

#### Before Your Surgery/Procedure Comments/Summary





Outcomes: Patient Experience

Before Your Surgery/Procedure Comments/Summary

	Other —
Negative	
	7. OK. Did not spend much time with dr.
	Unknown —
Positive	
	Good.
	Very satisfied.
	Good and cared for by the nurse and physician.
	It's so comforting when the dr. you see who's skilled is performing the surgery, or confidence is ever so more of success especially knowing my Creator had a share.
Negative	
	After surgery everything was bad I was out of surgery Outpatient for almost 2 1/2 hrs. No came talk to my family or let them know I was discharge to I walk in the waiting room myself.



Outcomes: Patient Experience

## Before Your Surgery/Procedure Comments/Summary

sitive			
I do trust *Di	so much. He s	eems and he is really professional and cari	ng doctor.
Aft	er Your Surgery/I	Procedure Summary ———	
Comments Processed:	12	Total Surveys Processed:	
Positive Reactions:	10	Mixed Reactions:	0
Negative Reactions:	2	Neutral Reactions:	0
Pos/Neg Ratio:	5.00	Open-ended Comments:	0



Outcomes: Patient Experience

#### Actions steps:

- Complete renovation of Same Day Surgery and Pre-operative Evaluation Clinic to one location on 3<sup>rd</sup> floor
   -enhances patient confidentiality and privacy
- Renovated Surgery and Perioperative Nursing offices and functionality to promote teamwork



## Strategic Goals for 2019 Improve delivery of surgical service for the residents of Cook County

- 1. Add Surgeons & Advanced Practice Providers / Secure critical technology (Develop Human Capital)
- 2. Program Development/In-house Coding and billing (Demonstrate value, adopt performance benchmarking)
- 3. Improve surgery patient safety/National Surgical Quality Improvement Project (*Provide high quality, safe and reliable care*)
- 4. Increase surgery specialty clinic and operative volume (Improve health equity)
- 5. Enhance surgical training programs (Lead in Medical Education and Clinical Investigation relevant to vulnerable populations)



# Thank You Questions & Answers



## Appendix Department of Surgery Operating Room Cases

	FY17	FY18	Change
	Total	Total	2017 to 2018
Breast Oncology	236	266	+13%
Cardiac	154	221	+44%
Colorectal	580	598	+3%
Otolaryngology	635	692	+9%
General Surgery	1,515	1,585	+5%
Surgical Oncology	111	130	+17%
Neurosurgery	337	314	-7%
Ophthalmology	1,133	1,323	+17%



## Appendix Departmentof Surgery Operating Room Cases

	FY17		Change
	Total	FY18 Total	2017 to 2018
Oral Surgery	343	398	+16%
Orthopedics – General	1,415	1,441	+2%
– Hand	327	537	+64%
Podiatry	112	130	+16%
Pediatrics – General	84	69	-18%
– Urology	143	121	-15%
Plastic Reconstructive			
Surgery	185	188	-2%
Thoracic	178	190	+7%
Urology	1472	1414	-4%
Vascular	614	659	+7%

